

2005 CAMPAIGN CONTRIBUTIONS AND EXPENSES State of Nevada

Construction Industry Committee

Certified # 7003 2260 0005 2484 4692

Name

Office

District

P.O. Box 7578

Reno, NV

89510

Mailing Address

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E-Mail Address

Select Appropriate Boxes ☐ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ Report #1 - Due March 29, 2005

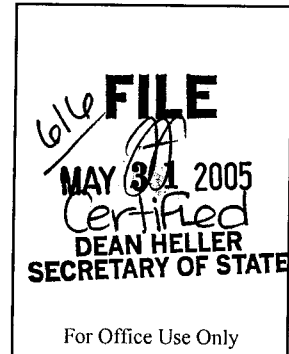
Period: Jan. 1, 2005 - Mar. 24, 2005

☐ Report #2 - Due May 31, 2004

Period: Mar. 25, 2005 - May 26, 2005

☐ Report #3 Due - July 15, 2005

Period: May 27, 2005 - June 30, 2005



☐ Annual Filing - Due January 15, 2006

Period: January 1, 2005-December 31, 2005

CONTRIBUTIONS SUMMARY

This Period

Cumulative From
Beginning of Report Period
#1 Through end of this
Reporting Period

1. Total Monetary Contributions Received Excess of \$100
2. Total Monetary Contributions Received of \$100 or Less

This Period

Cumulative From
Beginning of Report
Period #1 Through end
of this Reporting Period

3. Total Amount of Monetary

Contributions Received

(Add Lines 1 and 2)

\$0.00

4. Total Value of In Kind

Contributions Received in

Excess of \$100

EXPENSES SUMMARY

5. Total Monetary Expenses Paid Excess of \$100
6. Total Monetary Expenses Paid of \$100 or Less
7. Total Amount of All Monetary Expenses Paid

(Add Lines 5 and 6)

\$750.00

\$102.48

\$852.48

15. Total Value of In Kind

Expenses in Excess of \$100

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct

Signature

May 31, 2005

Date

CAMPAIGN CONTRIBUTIONSReport Period **#2**

Name

Office

District

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

Transfer Total Amount of All Campaign Contributions to Line 3 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN

CAMPAIGN CONTRIBUTIONSReport Period **#2**

Name _____

Office _____

District _____

Contributions of \$100 or Less

Date of Each Contribution	Amount of Each Contribution

Date of Each Contribution	Amount of Each Contribution

CAMPAIGN EXPENSES

Report Period

#2

Name

Office

District

Expenses In Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary

**NAME & ADDRESS OF PERSON,
GROUP OR ORGANIZATION WHO
RECEIVED THE PAYMENT FOR
THE EXPENSE(S)****CATEGORY**
NRS 294A 365**DATE OF EACH
EXPENSE****AMOUNT OF EACH
EXPENSE**Nevada Young Republicans
7350 Austin Creek Court
Reno, NV 89523

J

03/30/05

\$750.00

CAMPAIGN EXPENSES		Report Period	#2
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#2

Office

District

Expenses of \$100 or Less

[illegible][illegible]